NEBRASKA BOARD OF PUBLIC ACCOUNTANCY

P.O. Box 94725, Lincoln, NE 68509-4725 (402) 471-3595 or (800) 564-6111

Website: www.nbpa.nebraska.gov Fax: (402) 471-4484

APPLICATION FOR RENEWAL OF FIRM PERMIT FOR July 1, 2021 to June 30, 2022 and REGISTRATION OF OFFICE & WORK SPACE LOCATIONS

CURRENT PERMITS EXPIRE JUNE 30, 2021. The application must be completed and signed by the **CPA in charge** in Nebraska or the **Nebraska licensee** ("**Office Manager**"), include the \$50 fee for an annual permit <u>AND</u> each Nebraska office registration fee, and have an <u>original</u> signature. Incomplete applications will be returned unprocessed and deemed not to have been received.

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Firm:	
Manager:	
Address:	
City, State, Zip	
Phone:	Fax#:
Licensed as: (Form of Business Entity)	E-mail:
for the appropriate forms and information. DO NOT send and to register the firm's office and work space locations.)	and registered in Nebraska, you must contact the Board's office in this form - this form is to <u>renew</u> the current firm permit only
agreement with a state or federal agency, or been subsuch a license in this state or any other state or by a state. No. Yes; Attached are details regarding type of license.	your firm had any application for licensure denied, or any ded, has your firm signed any stipulation or consent order or eject to any investigative or other disciplinary action regarding te or federal agency or AICPA or any state CPA Society? In name and location of licensing agency, violation charged, eders), effective date of sanction, and any other pertinent
arbitration, or federal or state administrative proceed regardless of where the lawsuit or binding arbitration v ☐ No.	has your firm been named as a party in a lawsuit, binding ling involving Nebraska licensees or your Nebraska practice, vas filed? g of lawsuit or arbitration, name and location of the court or
	lawsuit, or binding arbitration, or status if still pending, and any
State Board Use Only (4/21)	
Date Recd Check # A	mount: \$50
Permit # Issued: Code: 475108(PC) 475	111(P.) 475109(LLC) 475110(LLP)
Receipt # Issued for Office Registration: @ \$25	per office = \$ Code: 475106(PC) 475107(LLC)

		LIANCE STATEMENTS
Ι.	1 ne	e firm is organized under the laws of which state?
2.		he firm is organized under the laws of another state, other than Nebraska, is your firm licensed in that state and/or n good standing in that state? Yes No; Attach information with specific details.
PE	ER	REVIEW REQUIREMENTS: (Title 288, Chapter 13)
		s this firm had a failed Peer Review in the previous three years? YesNo
		se check one of the following statements that apply to your firm.:
		This firm has been reviewed under Peer Review within the last three years.
		This firm has not issued any audits, reviews or compilations in the last three years. This firm was first licensed within the past three years.
		This firm enrolled in a Peer Review program within the last year.
5.	If Y	es this CPA firm have a subsidiary or an affiliate which is not a permit holder? Yes No (If no, skip to #6.) Yes, is a Disclosure Statement for Separation of Services completed for each client of this CPA firm that is also wed by the subsidiary or affiliate? (Firm Guidelines: See Board website.) Yes No
6.		thin the past five years, has this firm accepted commissions, contingent fees or referral fees? Yes No Yes, has the firm completed a Disclosure Statement for Commissions, Contingent fee, or Referral fee? Yes No (Title 288 Chapter 5 007.03; Firm Guidelines: See Board website.)
7.		at is the total <u>number</u> of LICENSED OWNERS of the firm BOTH IN and OUTSIDE Nebraska?he firm's owners are licensed CPAs, then proceed to Question #8.
	(Ca mu act **I	that is the total <u>number</u> of NON-LICENSED OWNERS** of the firm BOTH IN and OUTSIDE Nebraska? Idealate number as of May 1, 2021. You must provide a number .) Note: If the firm has only two members both st be active permit holders (CPA's). If the firm has 1 non-licensed owner, the firm must have at least two ive permit holders (CPAs). If the firm has any owners who are NOT certified public accountants or public accountants, you must ever the following questions a-j pursuant to Section 1-162.01 of the Public Accountancy Act. Please refer to Act for the definition of a "non-licensed owner."
	Fir	ms with non-licensed owners: (As of May 1, 2021)
	a.	Of the total number of owners of the firm, what percentage constitutes non-licensed owners? ${(PAA\ 1-162.01(1))}$ (Must be a precise percentage; do not use < or > or approximate. Cannot be more than 49%
	b.	Does every non-licensed owner actively participate in the business? \square No (Attach page with specific details.) \square Yes "Actively participate" is defined as the providing of personal services in the business entity licensed in Nebraska to practice public accounting, in the nature of management, performance of services for clients, or similar activities. Non-natural persons and individuals whose primary source of income from the business entity is provided as a result of passive investment will not be considered as actively participating in the business entity.
	c.	Are there any "non-natural persons" of the firm? See above. \square No \square Yes (Attach page with specific details.)
	d.	Of the firm's equity capital , what percentage is held or has been received by the total number of non-licensed owners?
		Of the firm's voting rights , what percentage is held or has been received by the total number of non-licensed owners?
		Of the firm's profits or losses , what percentage is held or has been received by the total number of non-licensed owners?

	company member, director, off defined by the Public Accounta	icer, or other offici			older, limited liability term "principal" as
	□ No	□Yes; List name	and title		
f.					
g.	Has any non-licensed owner be States, or of any other jurisdicti ☐ No	nsed owner been charged or convicted of any felony under the laws of any state of the United other jurisdiction? Yes; Attach information with specific details.			
h.	Has any non-licensed owner be under the laws of any state, of t				s dishonesty or fraud,
	□ No	☐ Yes; Attach	information with sp	ecific details.	
i.	i. Has any non-licensed owner had his/her professional, membership, or vocational license(s), if any, suspended o revoked by a licensing agency of any state of the United States or of any other jurisdiction or otherwise been the subject of other final disciplinary action by any such agency?				
	□ No	☐ Yes; Attach	information with sp	ecific details.	
j. Is any non-licensed owner in violation of any rule or regulation regarding the character or conduct promulgate by the board relating to owners who are not certified public accountants or public accountants?					
	by the board relating to owners	who are not certiff	ed public accountant	ts or public accountants	s?
	□ No		information with sp	•	s?
	·	☐ Yes; Attach	information with sp	ecific details.	
	□ No List All Owners of the firm Certificate number. Attach a	☐ Yes; Attach	information with spir office location, necessary.	ecific details.	
	□ No List All Owners of the firm Certificate number. Attach a	Yes; Attach n, indicating the dditional sheets if	information with spir office location, necessary.	ecific details. and Nebraska and/o	
	□ No List All Owners of the firm Certificate number. Attach a	Yes; Attach n, indicating the dditional sheets if	information with spir office location, necessary.	ecific details. and Nebraska and/o	
	□ No List All Owners of the firm Certificate number. Attach a	Yes; Attach n, indicating the dditional sheets if	information with spir office location, necessary.	ecific details. and Nebraska and/o	
	□ No List All Owners of the firm Certificate number. Attach a	Yes; Attach n, indicating the dditional sheets if	information with spir office location, necessary.	ecific details. and Nebraska and/o	
JLL	□ No List All Owners of the firm Certificate number. Attach and NSED OWNERS in NE LEGAL NAME	Yes; Attach m, indicating the dditional sheets if	information with spir office location, necessary.	and Nebraska and/o	or other state CPA
CEN	□ No List All Owners of the firm Certificate number. Attach a	Yes; Attach n, indicating the dditional sheets if	information with spir office location, necessary.	ecific details. and Nebraska and/o	
CEN	List All Owners of the firm Certificate number. Attach a NSED OWNERS in NE LEGAL NAME	Yes; Attach n, indicating the dditional sheets if OFFICE LOC	information with spir office location, necessary. CATION STATE	other state	or other state CPA OTHER STATE
CEN	List All Owners of the firm Certificate number. Attach a NSED OWNERS in NE LEGAL NAME	Yes; Attach n, indicating the dditional sheets if OFFICE LOC	information with spir office location, necessary. CATION STATE	other state	or other state CPA OTHER STATE

8.

NON-LICENSED OWNERS – any state	OFFICE LOCATION
FULL LEGAL NAME	

OFFICE AND WORK SPACE REGISTRATION

The office registration is due June 30th to coincide with the firm permit renewal. According to Section 1-135 of the Public Accountancy Act of 1957, Revised, **each office established or maintained for the practice of public accounting in this state** by (1) a CPA, (2) a partnership of CPAs (3) a LLC of CPAs (4) an accountant from a foreign country, or (5) a corporation, SHALL BE REGISTERED ANNUALLY WITH THE BOARD.

Unless practicing under Mobility, each office shall be under the supervision of a manager who holds a Nebraska active permit ("Office Manager"). Such manager may serve in such capacity at one office only. Such manager shall be directly responsible for the supervision and management of the office and may be subject to disciplinary action for the actions of the person or firm or any persons employed by that office of the person or firm that relate to the practice of public accountancy.

Notification shall be given to the Board within thirty days of any change in managers of any office, and after the admission or withdrawal of a partner from any partnership or a member from any limited liability company so registered. Notification shall also be given the Board when any firm changes its name, opens a new office or closes an office. Our records reflect the address given on page one as the "headquarter location" for the firm. Please double check this address and make changes as necessary.

FIRMS WITHOUT A NEBRASKA OFFICE:

If your firm does NOT have a Nebraska office, please record the office location(s) where business for Nebraska clients is conducted, reports for Nebraska clients are issued, etc. **There is NO charge for offices located outside Nebraska.** Simply return this completed application and the \$50 firm permit fee.

OFFICE LOCATIONS:

Please list each **office** location of the firm below. Photocopy this page for more than five office locations and attach it to this application. Do not use Post Office addresses.

A \$25 fee is charged for each <u>Nebraska</u> office. Add this fee to the \$50 firm permit fee and return with completed application.

Street Address (include City, State, Zip)	Office Manager (CPA with Permit)	Phone Number	Fax Number & E-mail
1 st (Fee is \$25)			
2 nd (Fee is \$25)			
3 rd (Fee is \$25)			
4 th (Fee is \$25)			
5 th (Fee is \$25)			

WORK SPACE:

Title 288, Chapter 10 defines "work space" as a temporary location maintained by a CPA or PA firm. Work space shall be registered with the Board within ten days prior to first opening such work space, and the Board shall also be notified when such work space is closed for a period of more than thirty days. Work spaces may not be advertised on permanent window or door signs, display signs, building directories, letterhead, business cards or in telephone directories, newspapers or other types of advertising. Professional staff of a firm may practice public accountancy in such work space only on a part time basis. There is no fee for registering work space locations. This firm has the following work space location(s):

Street Address (include City, State, & Zip)	Phone Number	CPA Owner	
1 st			
2 nd			

Abbreviated Form of the Firms registered names: If your firm uses an abbreviated firm name, please submit a hard copy of your firm's letterhead to the Board office via U.S. mail or email: kristen.vanwinkle@nebraska.gov (Firm Guidelines: Form of Practice #4, 11-2008).

CERTIFICATION:

- IF THERE IS A NEBRASKA OFFICE, THIS FORM MUST BE SIGNED AND DATED BY THE NEBRASKA LICENSEE ("Office Manager").
- IF THERE IS NO NEBRASKA OFFICE, THIS FORM MUST BE SIGNED AND DATED BY THE CPA IN CHARGE OF WORK COMPLETED IN NEBRASKA.
- Only an original signature is acceptable.

"I certify on behalf of the firm that the statements made herein are true and accurate to the best of my knowledge and belief."

Signature		_
Printed Name		
Title		
CPA License # and State Issued_		
ble to Nebraska Board of Public A	ccountancy	
	0	
_	<u>\$ 50</u>	
Fee: (\$25 x # of NE Offices)		
:	<u>\$</u>	
1	Printed Name Title CPA License # and State Issued ble to Nebraska Board of Public A Fee: (\$25 x # of NE Offices)	Printed Name Title CPA License # and State Issued ble to Nebraska Board of Public Accountancy Fee: (\$25 x # of NE Offices) \$\frac{\$50}{}\$\$